2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 14, 2005 8:00 am Secretary of State DOCUMENT # N96000000936 04-14-2005 90097 028 ****61.25 I AM MINISTRIES, INC. Principal Place of Business Mailing Address 1872A COMMERCE AVE P.O. BOX 2458 VERO BEACH, FL 32961-2458 US VERO BEACH, FL 32960 2. Principal Place of Business 1015 Commerce 3. Mailing Address Suite, Apt. #, etc. 04062005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-3354241 Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KING, TOM 5525 16TH ST Street Address (P.O. Box Number is Not Acceptable) VERO BEACH, FL 32966 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered egent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Due by May 1, 2005 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. DBM TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BAIRD, JAMES K NAME 1020 11TH PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL CITY-ST-ZIP DP < Change TITLE ☐ Delete ☐ Addition ⇒DBM KING, TOM NAME NAME STREET ADDRESS 5525 16TH ST STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32966 CITY-ST-7tP TITLE ☐ Delete TITLE ☐ Change ■ Addition BRUBAKER, LEE NAME NAME STREET ADDRESS 3376 1ST LN STREET ADORESS CITY-ST-ZIP VERO BEACH, FL 32968 CITY-ST-ZIP TITLE □ Detete TITLE ☐ Change ☐ Addition GOFF, TERRY NAME STREET ADDRESS 3555 MARTHAS LN. STREET ADDRESS CATY-ST-ZIP VERO BEACH, FL 32967 CFTY-ST-ZIP ☐ Delete TITI F ☐ Change Addition Jay CoKitt NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change Philip Van Vynckt NAME NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trostee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

PLL

YPED OR PRIVIED MANE OF SIGNENG OFFICER OR DIRECTOR

SIGNATURE:

FILED

ATTACHMENT

H0056623

2005 Non-For-Profit Corporation Annual Report

Document # N96000000936
Entity Name I Am Ministries, Inc.

Additional Officers and Directors

Jon Bates DBM 4700 Hwy A1A Vero Beach, Fl 32963

Jim Beckley DBM P O Box 2459 Vero Beach, Fl 32961

Ginny Blossom DBM 841 Camelia Lane Vero Beach, Fl 32963